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APPLICANTS
Jim Sowerwine, Naples, FL;

** CONTINUING DATA ** OK ^{AAH} 10/5/04 OK ^{AAH} 5/04/05 OK ^{AAH} 2/2/06

** FOREIGN APPLICATIONS ** OK ^{AAH} 10/5/04 OK ^{AAH} 5/04/05 OK ^{AAH} 2/2/06

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 02/01/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 5	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged
Examiner's Signature: *[Signature]* Initials: *[Initials]*

ADDRESS
21901
SMITH & HOPEN PA
15950 BAY VISTA DRIVE
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33760

TITLE
Golf swing practice device

FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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